

DECLARATION

As below named inventors, I/we hereby declare:

That our residence(s), post office address(es) and citizenship are as stated below next to our/my name(s).

That I/we verily believe that I/we am/are an/the original, first and joint inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

METHOD OF IMPROVING A DIGITAL IMAGE HAVING WHITE ZONES

the specification of which (check one)

(X) is attached hereto. was filed on _____ as Application Serial No. _____ and was amended on _____ (if applicable).

That I/we have reviewed and understand the contents of the above-identified specification, including the claims(s), as amended by any amendment referred to above.

That I/we acknowledge the duty to disclose information known to be material to patentability of this application in accordance with Title 37, Code of Federal Regulations, § 1.56(a).

That I/we hereby claim foreign priority benefits under Title 35, United States Code, § 119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate on this invention having a filing date before that of the application on which priority is claimed:

Prior Foreign Applications			Priority Claimed	
			Yes	No
_____	_____	_____		
Number	Country	(Day/Month/Year Filed)		
_____	_____	_____		
Number	Country	(Day/Month/Year Filed)		

I/we hereby claim the benefit under 35 U.S.C. § 1119(e) of any United States provisional application(s) listed below:

_____	_____	_____
(Application Serial No.)	(Filing Date)	(Status) - (Patented, pending, abandoned)
_____	_____	_____
(Application Serial No.)	(Filing Date)	(Status) - (Patented, pending, abandoned)

That I/we hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose material information as defined in title 37, Code of Federal Regulations, § 1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

_____	_____	_____
(Application Serial No.)	(Filing Date)	(Status) - (Patented, pending, abandoned)


(Application Serial No.)


(Filing Date)

(Status) - (Patented, pending, abandoned)

Further, as a named inventor, I/we certify that the Government of the United States of America, as represented by the Administrator of the National Aeronautics and Space Administration, has ☒ an assignment in, or ☐ license to the invention set forth in this application and has the irrevocable right to practice this application and to receive the patent.

I/we hereby declare that all statements made herein of my/our own knowledge are true and that all statements made on information and belief are believed to be true; and further that these, statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. § 1001; and that such willful false statements may Jeopardize the validity of the application or any patent issuing thereon.

FULL NAME OF INVENTOR	LAST WOODELL	FIRST Glenn	MIDDLE OR INITIAL A.
RESIDENCE AND CITIZENSHIP	CITY Newport News	STATE OR FOREIGN COUNTRY Virginia	COUNTRY OF CITIZENSHIP U.S.
POST OFFICE	STREET NO. AND NAME 637 Village Green Parkway	CITY AND STATE OR (COUNTRY) Newport News, Virginia	ZIP CODE 23601
SIGNATURE 			DATE 6-15-01

FULL NAME OF INVENTOR	LAST JOBSON	FIRST Daniel	MIDDLE OR INITIAL J.
RESIDENCE AND CITIZENSHIP	CITY Newport News	STATE OR FOREIGN COUNTRY Virginia	COUNTRY OF CITIZENSHIP U.S.
POST OFFICE	STREET NO. AND NAME 42 Elm Avenue	CITY AND STATE OR (COUNTRY) Newport News, Virginia	ZIP CODE 23602
SIGNATURE 			DATE 6/19/01

COMBINED DECLARATION AND POWER OF ATTORNEY

(ORIGINAL, DESIGN, NATIONAL STAGE OF PCT, SUPPLEMENTAL, DIVISIONAL, CONTINUATION OR CIP)

As a below named inventor, I hereby declare that:

TYPE OF DECLARATION

This declaration is of the following type: (check one applicable item below)

- ☒ original
☐ design
☐ supplemental

NOTE: If the declaration is for an international application being filed as a divisional, continuation, or continuation-in-part application do not check next item; check appropriate of last three items.

☐ national state of PCT

NOTE: If one of the following 3 items apply then complete and also attach ADDED PAGES FOR DIVISIONAL, CONTINUATION, OR CIP.

- ☐ divisional
☐ continuation
☐ continuation-in-part (CIP)

INVENTORSHIP IDENTIFICATION

WARNING: If the inventor are each not the inventors of all the claims an explanation of the facts, including the ownership of all of the claims at the time the last claimed invention was made, should be submitted.

My residence, post office address and citizenship are as stated below next to my name, I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

METHOD OF IMPROVING A DIGITAL IMAGE HAVING WHITE ZONES

00888816-062501

SPECIFICATION IDENTIFICATION

the specification of which: (complete (a), (b), or (c))

- ☒ (a) is attached hereto.
☐ (b) was filed on: _____
as Serial No. _____
or ___ Express Mail No., as Serial No. not yet known
_____ and was amended on _____ (if
applicable).

NOTE: Amendments filed after the original papers are deposited with the PTO which contain new matter are not accorded a filing date by being referred to in the declaration. Accordingly, the amendments involved are those filed with the application papers, or, in the case of a supplemental declaration, are those amendments claiming matter not encompassed in the original statement of invention or claims. See 37 CFR 1.67.

- ☐ (c) was described and claimed in PCT International Application No. _____ filed on _____ and amended under PCT Article 19 on _____ (if any).

ACKNOWLEDGMENT OF REVIEW OF PAPERS AND DUTY OF CANDOR

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations. § 1.56(a).

___ In compliance with this duty there is attached an information disclosure statement. 37 CFR 1.97.

PRIORITY CLAIM

I hereby claim foreign priority benefits under Title 35, United States Code, § 119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventors certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed.

00888815-052501

✓
____ (complete (d) or (e))
____ (d) no such applications have been filed.
____ (e) such applications have been filed as follows:

NOTE: Where item (c) is entered above and the international application which designated the U.S. claimed priority check item (e), enter the details below and make the priority claim.

**EARLIEST FOREIGN APPLICATION(S), IF ANY FILED WITHIN 12 MONTHS
(6 MONTHS FOR DESIGN) PRIOR TO THIS U.S. APPLICATION**

COUNTRY	APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 37 USC 119
			___ YES ___ NO
			___ YES ___ NO

**CLAIM FOR BENEFIT OF
PRIOR U.S. PROVISIONAL APPLICATION(S) (34 USC §119(e))**

I hereby claim the benefit under Title 35, United States Code, § 119(e) of any United States Provisional applications listed below:

PROVISIONAL APPLICATION NUMBER

FILING DATE

____ / _____

**CLAIM FOR BENEFIT OF
EARLIER US/PCT APPLICATION(S) UNDER 35 USC §120**

____ The claim for the benefit of any such applications are set forth in the attached ADDED PAGES TO COMBINED DECLARATION AND POWER OF ATTORNEY FOR DIVISIONAL, CONTINUATION OR CONTINUATION-IN-PART (C-I-P) APPLICATION.

**ALL FOREIGN APPLICATION(S), IF ANY FILED MORE THAN 12 MONTHS
(6 MONTHS FOR DESIGN) PRIOR TO THIS APPLICATION:**

POWER OF ATTORNEY

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application, and transact all business in the Patent and Trademark Office connected therewith.

Attorney: PETER J. VAN BERGEN, ESQ.
Reg. No.: 32,178

(check the following item, if applicable)

— Attached as part of this declaration and power of attorney is the authorization of the above-named attorney(s) to accept and following instructions from my representative(s)

SEND CORRESPONDENCE TO

**DIRECT TELEPHONE CALLS TO (NAME
AND TELEPHONE NUMBER)**

PETER J. VAN BERGEN, ESQ.
402 West Duke of Gloucester St.
Williamsburg, Virginia 23185


PETER J. VAN BERGEN, ESQ.
(757) 220-2649

105250-062504

DECLARATION

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

SIGNATURE (S)

NAME OF INVENTOR	LAST Rahman	FIRST Zia-ur	MIDDLE INITIAL
RESIDENCE AND CITIZENSHIP	CITY Williamsburg	STATE Virginia	CITIZENSHIP U.S.
POST OFFICE ADDRESS	ADDRESS 4840 Bristol Circle	CITY AND STATE Williamsburg, VA	ZIP CODE 23185
SIGNATURE 			DATE 06/15/2001

10520-9T88860

CHECK PROPER BOX(ES) FOR ANY OF THE FOLLOWING ADDED PAGE(S) WHICH
FORM A PART OF THIS DECLARATION

___ Signature for third and subsequent joint inventors. Number of
pages added ____.

___ Signature by administrator(trix), executor(trix) or legal
representative for deceased or incapacitated inventor. Number
of pages added ____.

___ Signature for inventor who refuses to sign or cannot be
reached by person authorized under 37 CFR 1.47. Number of
pages added ____.

___ Added pages to combined declaration and power of attorney for
divisional, continuation, or continuation-in-part (CIP)
application.

___ Number of pages added ____.

___ Authorization of attorney(s) to accept and follow instructions
from representative.

If no further pages form a part of this Declaration then end this
Declaration with this page and check the following item

✓ THIS DECLARATION ENDS WITH THIS PAGE

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